

## CLAIMS ONLY

Application Number

10/734,242

Filing Date

Update

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	X					
2						
3						
4						
5						
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13						
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24						
25						
26						
27	1					
28		1				
29		1				
30		1				
31		1				
32		1				
33		1				
34		1				
35	1					
36		1				
37		1				
38		1				
39		1				
40		1				
41		1				
42	1					
43		1				
44		1				
45	1					
46						
47						
48						
49						
50						
Total Indep	4					
Total Depend	15					
Total Claims	19					

*	Indep	Depend	*	Indep	Depend	*
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100						
Total Indep						
Total Depend						
Total Claims						